Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H160000305773)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone

: (305)444-4994

Fax Number

: (305)444-4977

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

E	<ul> <li>3.1</li></ul>			
Email.	Address:			

# FLORIDA LIMITED LIABILITY CO. 1120 WEST LLC

Certificate of Status	0		
Certified Copy	1		
Page Count	03		
Estimated Charge	\$155.00		

Electronic Filing Menu

Corporate Filing Menu

Help

FEB - 9 2016 T DDMAAA

# ARTICLES OF ORGANIZATION OF 1120 WEST LLC

### ARTICLE I

The name of the limited liability company is 1120 WEST LLC.

## ARTICLE II

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

6750 Granada Blyd, Coral Gables, FL 33146 P.O. Box 557807 Miami, FL 32255-7807

#### ARTICLE III

The purpose for which this Limited Liability Company is organized is any and all lawful business.

#### ARTICLE IV

The name and the Florida street address of the registered agent of the limited liability company is:

Aragon Registered Agents, Inc. 255 Alhambra Circle Suite 500 Coral Gables, FL 33134

Having been named as the registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Date: 2/4//

#### ARTICLE V

The name and address of each Manager is as follows:

<u>Title:</u> Name and Address:

Manager Reinaldo Fernandez

6750 Granada Blvd. Coral Gables, FL 33146

Coral Gables, FL 33140

Manager Boatriz Fernandez 6750 Granada Blvd.

Coral Gables, FL 33146

In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalities of perfury that the facts stated herein are true.

Authorized Signee:

Beatriz Fernandez